

## I-20 TRANSFER FORM - CLA VIRGINIA

All F-1 students must complete an I-20 Transfer Form when transferring to another school. Once completed, please mail or email this form to:

Mail:

California Language Academy 7777 Leesburg Pike, #4LS Falls Church, VA 22043

Email:

info@cla.edu

## **CLA CODE: LOS214F53727002**

**STEP 01:** Complete the student information below to authorize the release of information from your current school. *"I authorize you to send the information requested in STEP 02 to California Language Academy".* 

Student Last Name:	St	udent First Name:		
Local Address:		State:		
City:	Province:	Postal (	Postal Code:	
Start Date at California Language Ac	ademy (mm/dd/yyyy):			
Student's Signature  STEP 02: Give this form to your curre  1. To the best of your knowledge, is to 2. How long has the student been en	he student currently ir	legal status and eligible to transfer?	Yes To:	No
Student SEVIS ID:	SI	EVIS Release Date (mm/dd/yyyy):		
Name of School:		City:		
Name of (P)DSO:				
Phone:	Email:			
(P) = 0 = 0'				
(P)DSO Signature:		Date (mm/dd/yyyy):		